

## Application Data Sheet

### **Application Information**

Application number::

Filing Date:: 02/25/02

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Increasing Antibody Affinity by Altering  
Glycosylation of Immunoglobulin Variable Region

Attorney Docket Number:: 011823-004012US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 3

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Hong Kong  
Status:: Full Capacity  
Given Name:: Man Sung  
Middle Name::  
Family Name:: Co  
Name Suffix::  
City of Residence:: Cupertino  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 10230 Yoshino Place  
City of Mailing Address:: Cupertino  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 95014

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Middle Name:: A.  
Family Name:: Scheinberg  
Name Suffix::  
City of Residence:: New York  
State or Province of Residence:: NY  
Country of Residence:: US  
Street of Mailing Address:: 325 Central Park West  
City of Mailing Address:: New York  
State or Province of mailing address:: NY

Country of mailing address::

Postal or Zip Code of mailing address:: 10025

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Cary  
Middle Name:: L.  
Family Name:: Queen  
Name Suffix::  
City of Residence:: Los Altos  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 622 Benvenue  
City of Mailing Address:: Los Altos  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94022

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	08/862,871	05/23/97

08/862,871	Divisional of	08/372,262	01/13/95
08/372,262	Continuation of	07/850,354	03/09/92

### **Foreign Priority Information**

Country:: Application number:: Filing Date::

### **Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::